

IV. MEDICAID ELIGIBILITY: BASICS

A. Introduction

Medicaid is a national program that is also a set of state-federal partnerships. Established by law in Title XIX of the Social Security Act, Medicaid furnishes medical assistance to specific populations in need. Federal law requires that every state provide certain types of medical coverage to specific populations. In addition, states have the option to cover other populations and services, as long as they meet national standards created by the federal Medicaid program.

Employees or contractors of LHJs participating in the Medicaid Administrative Match program may perform activities that assist individuals to become eligible for the Medicaid program, and help them to access services covered by Medicaid once they are eligible. At the program level, staff may work to identify gaps and barriers in Medicaid-covered services and to engage in planning and program development activities that can overcome these barriers and gaps. Information about the types of Medicaid eligibility available to individuals, and the services each category covers is summarized below, as background to the MAM program.

Within the Medicaid program, the populations groups receiving mandated coverage in accordance with federal law are called the “categorically needy”. Individuals receiving medical assistance at state option are known as the “medically needy”. In both of these programs, the federal and state governments participate in the cost of the program. The federal share is different for each state, and is indexed annually based on poverty levels and other factors. The federal share of the Medicaid cost of both the categorically and medically needy programs is never less than 50% of the total.

Categorically Needy (CN) Programs. Individuals eligible for CN programs may also be eligible for cash benefits under the Temporary Assistance for Needy Families program (TANF) or Supplemental Security Income (SSI). The CN program also includes full scope coverage for eligible pregnant women and children.

Medically Needy (MN) Programs. Individuals eligible for MN programs have income and resources above the limits set for the CN program. The MN programs include aged, blind, and disable persons; it also includes pregnant women, children, and refugees with income and/or resources above what is allowed for the CN program. The scope of coverage under the MN program is less than what is offered under the CN program.

Other Federal Medicaid Programs. In addition to the CN and MN programs, there are several other Medicaid programs that have federal funding. The Children’s Health Insurance Program (CHIP), Alien Emergency Medical (AEM), the Take

Charge Family Planning Medicaid waiver program, and the Breast and Cervical Cancer Treatment Program are examples of these programs.

State Only Medicaid Programs. The State also supports several medical assistance programs of limited scope for certain classes of individuals. The General Assistance-Unemployable is one such category. The Medical Care Services program is another. As state only programs, there is no federal participation.

B. Eligibility Categories

There are many categories of eligibility for both the CN and MN programs. A description of each of these categories may be found in a document published by the Medical Assistance Administration annually. It is called the Medical Assistance Eligibility Overview and may be downloaded from the MAA website: <http://fortress.wa.gov.dshs.maa>.

C. Coverage

The [covered services chart](#) on the Medical Assistance Administration website lists major services which are available to clients by program: Medicaid CN (Categorically Needy), non-Medicaid MCS (Medical Care Services for GAU and ADATSA), and Medicaid MN (Medically Needy).

D. Medical Assistance Programs

A wide range of medical services is available for low-income individuals and families – including medical assistance programs operated with only state funds. The chart on the following page provides links to descriptions of the major medical assistance programs in Washington State and describes which programs have federal financial participation and which programs do not.

	Full Scope Medicaid	Limited Scope Medicaid	Non-Medicaid
<u>Family Medical</u>	-TANF -Family Medical Program		-State Family Assistance
<u>Woman's Health</u>	-CN Medical Program -Postpartum Extension -Cash Assistance for Pregnant Women	-Family Planning Extension -Non-Citizen Pregnant Women -Breast & Cervical Treatment -Take Charge	
<u>Children's Programs</u>	-CN Medical Program	-Children's Health Insurance Program (CHIP)	
<u>Refugee's & Aliens</u>	-Refugees	-Alien Emergency Medical	
<u>Aged, Blind & Disabled</u>	-SSI/GAX -Healthcare for Workers with Disabilities (HWD)		-General Assistance Unemployable (GAU)
<u>Medically Needy</u>	-Medically Needy		
<u>Basic Health</u>			-Basic Health

D. CUSTOMER TOLL-FREE NUMBERS & USEFUL WEB SITES. Click on this link to find toll free numbers and useful web addresses about the Medicaid program in Washington.